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## EXHIBIT B

### FILED GRIEVANCES ON FOOD SHORTAGES

22-0762

22-0754

22-0740

## ALAMEDA COUNTY SHERIFF'S OFFICE

## INMATE GRIEVANCE FORM

Santa Rita Jail  Glenn E. Dyer Detention Facility

ADA  
 RELATED

NAME: David Misch PFN: AMU-732 DATE: 2/5/22 HU/FLOOR 2E5

Only one grievance issue per form ---- (Subject to refusal if failure to comply) DATE GRIEVANCE OCCURRED 2-1 → 2-5-22

Religious Meals/Kosher/Halal Diet/Trays are arriving without the Required portions since implementation of New Smaller Trays.

Grievance Details: Since 2/1/22 The Breakfast trays - Cereal, Cold or Hot. Alameda County Religious Meals Menu (requires 1½ cups) of which ever is called For That Day - Oatmeal/Corn Flakes/Toasted O's. This is easily checked by dumping contents into a 8oz paper cup- which is equivalent to 1 cup in "Volume". So it should fill the cup 1 and ½ times. Oatmeal Trays barely contain 1 cup on those days. Cold cereals Barely over a cup, always short now of Required Portion size every day so far.

\* Dinners - Starches, Rice, Beans, Lentils etc (Require 1½ c).

Not receiving even a full 1 cup, so short at least ½ c

- Main Protein Portion/TVP, multi-flours (Require ¾ c)

Lucky to say we get ½ c so short at least ¼ c

- Salads/lettuce/Cooked Kettle Veg/Mixed/ menu (requires 1 c)

Only receiving ½ to ¾ c max, so short 25% to 50%

Alameda County Religious Meals Menu - 2600 calories Per Day,

Menu clearly states all side dishes are Volume measurement.

Unless otherwise specified, as in each, packet, or ozw =

= ounces by weight as in 3ozw Counter Cuppot sticks in lunch. All inmates of this diet are being denied Required Amnts. Please Comply w/Menu.

INMATE SIGNATURE: D. Misch

By signing this form, you are consenting to a search of your medical, dental, or mental health records for the purpose of this investigation only. This acts as a waiver to your HIPAA rights. If you disagree with this, you must indicate so in your grievance.

\*\*\*DO NOT WRITE ON BACK OF THIS FORM. USE ADDITIONAL GRIEVANCE FORMS IF NECESSARY\*\*\*

\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*

Received by Deputy: D. NICHOLSON Badge# 2469 Date: 2-5-22

Resolved at Deputy Level

Inmate Acceptance (Signature) \_\_\_\_\_

Cannot be resolved at Deputy Level

Grievance Tracking Number: 22-0762

PREA Tracking Number: \_\_\_\_\_

The Deputy who received the inmate's grievance shall attach an Inmate Grievance Response Supplemental Form (ML-53) detailing how they resolved or attempted to resolve the inmate's grievance.

Food

**ALAMEDA COUNTY SHERIFF'S OFFICE  
INMATE GRIEVANCE FORM**



**ADA  
RELATED**

Santa Rita Jail  Glenn E. Dyer Detention Facility

NAME: David Misch PFN: AMU-732 DATE: 2-5-22 HU/FLOOR 2E5

**Only one grievance issue per form ---- (Subject to refusal if failure to comply) DATE GRIEVANCE OCCURRED 2-5-22**  
**Kosher-Halal Trays are missing 1 of the 2 Peanut Butter Packets Required**  
**By: Arconek Religious Meals Menu**

**Grievance Details:**

On Saturday - 2-5-22 approx 0630 hrs Breakfast meals were passed out. Upon receiving the tray I noticed it only had 1 of the 2 required Peanut Butter Pkts.

According to the Arconek/Alameda County Religious meals menu.

Any Breakfast calling for Peanut Butter - Mon/Wed/Sat Requires 2-1oz Pkets each.

The tray was shown and opened in front of Deputy: Jackson along with my copy of menu.

This is the second time in one week, this also occurred on 2-2-22. I sent a Message Request to kitchen to notify them of the omission of required food item in Kosher-Halal Diet TRAYS.

Please instruct kitchen staff to supply the required amounts in all kosher-halal Breakfast Trays. per approved menu.

**INMATE SIGNATURE:** David Misch

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**\*\*\*DO NOT WRITE ON BACK OF THIS FORM. USE ADDITIONAL GRIEVANCE FORMS IF NECESSARY\*\*\*  
 \*\*\*DO NOT WRITE BELOW THIS LINE\*\*\***

Received by Deputy: M JACKSON Badge# 2497 Date: 02/05/22

Resolved at Deputy Level Inmate Acceptance (Signature) \_\_\_\_\_

Cannot be resolved at Deputy Level Grievance Tracking Number: 77-0754

PREA Tracking Number: \_\_\_\_\_

*The Deputy who received the inmate's grievance shall attach an Inmate Grievance Response Supplemental Form (ML-53) detailing how they resolved or attempted to resolve the inmate's grievance.*

ALAMEDA COUNTY SHERIFF'S OFFICE  
INMATE GRIEVANCE FORM

[ ] Santa Rita Jail [ ] Glenn E. Dyer Detention Facility

Food

 ADA  
RELATEDNAME: David Misch PFN: AMU-732 DATE: 2/4/22 HU/FLOOR 2-E-5Only one grievance issue per form ---- (Subject to refusal if failure to comply) DATE GRIEVANCE OCCURRED 2/4/22

## Grievance Details:

At Approx 1210 hrs my kushen / Halal Religious Lunch meal I was delivered by I/M worker and Deputy White.

I immediately notified the Deputy that much lunch I was missing the fruit - Orange, ~~Do~~ I each Required by Aramarks, Every Day Alameda County Religious Meals menu. (This was noted Jon, body Scamera also.)

I also noted it only had 3-Duplex Cookies. The Religious meals menu require 4-Duplex Cookies every Day.

This is the second day this Ommission of Required Portions has occurred. I thought One day was a fluke - 2 days in a row can become a Standard if not immediately corrected.

Please Inform Kitchen staff the Aramark-Alameda County Religious Meals Menu require 1pc of fruit in each lunch and 4 duplex cookies every day.

INMATE SIGNATURE: D. Misch

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\*\*\*DO NOT WRITE ON BACK OF THIS FORM. USE ADDITIONAL GRIEVANCE FORMS IF NECESSARY\*\*\*

\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*

Received by Deputy: Sgt. C. H. MURRAY Badge# 1419 Date: 2/4/22

[ ] Resolved at Deputy Level

Inmate Acceptance (Signature) \_\_\_\_\_

[ ] Cannot be resolved at Deputy Level

Grievance Tracking Number: 22-0740

PREA Tracking Number: \_\_\_\_\_

The Deputy who received the inmate's grievance shall attach an Inmate Grievance Response Supplemental Form (ML-53) detailing how they resolved or attempted to resolve the inmate's grievance.